

# Application for Supportive Housing in Ottawa

## **Supportive Housing**

#### What is Supportive Housing?

Supportive housing is a community-based, person-centered model of providing affordable, transitional and permanent accommodation. Housing support staff assists individual tenants in attaining their optimum quality of life and encourages the development of healthy communities.

Supportive housing communities reduce the cycles of institutionalization and homelessness among people who need assistance in maintaining independent housing.

### Why is Supportive Housing Unique?

Supportive housing helps people who have difficulty living independently or maintaining their housing. It reduces isolation that is often the consequence of living with such challenges as mental illness, substance abuse and other circumstances by providing those in need with on-site supports. Housing support services can include community referrals, assistance with life skills, counseling, crisis intervention, assistance maintaining housing and opportunities for peer support and community involvement.

Households on the supportive housing waiting list are entitled to a total of 3 offers of housing with supportive housing providers. If all offers are refused, the file will be cancelled.

Before receiving a supportive housing unit, there may be some <u>ADDITIONAL STEPS</u> to your application, such as:

- Each supportive housing provider may require more information about your needs (you may have to fill out a more detailed form with the provider)
- You may be interviewed by the supportive housing provider to discuss your needs and requirements.
- You may be required to provide references to the supportive housing provider that will assist in determining your suitability for this type of housing.

June 9, 2025 Page **1** of **16** 



## **General Eligibility Rules**

Eligibility for Supportive Housing is based on a number of requirements. Based on the information you provide and any additional supporting documents that may be needed, The Registry will determine your eligibility.

#### To be eligible for Supportive Housing:

- At least 1 person in your household must be 16 years of age and older and able to live independently meaning that person can carry out normal essential activities of day to day living on their own or with the aid of support services when required; and
- Each member of the household must:
  - be a Canadian citizen,
  - have made an application for status as a permanent resident or be Landed Immigrant, or
  - have made a claim for refugee protection (Refugee Claimant).

# Households will be ineligible or cease being eligible for Supportive Housing in certain circumstances including:

- If a member of the household is currently under a deportation, departure, or exclusion order to leave Canada;
- If a member of the household owes money with respect to a previous social housing tenancy, unless the matter has been addressed or resolved;
- If a member of the household fails to provide updated information and documents or notify us about changes;
- If the household's income and assets are above the allowable limits;
- If a member of the household has been convicted of an offence in relation to RGI assistance or found by a court of law or the Landlord and Tenant Board to have misrepresented their income for the purpose of RGI assistance;
- If a member of the household owns a house or rents any other property, you must agree to sell it or terminate the lease within 180 days of being housed.

### **How to Complete the Application:**

- 1. Print clearly in ink.
- 2. Read and complete **all** sections of the application form.
- 3. Attach photocopies of all the documents required. Use the checklist at the back of the application to make sure you have included everything.
- 4. Mail or deliver your application to The Registry at:

240 Catherine St., Suite 110

Ottawa, ON, K2P 2G8

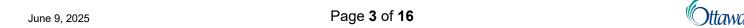
5. If you need help with the form, please call us at 613-526-2088. You may also visit our website at <a href="https://www.housingregistry.ca">www.housingregistry.ca</a> for additional information on the application process.



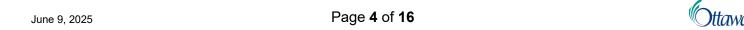
## **Important Information**

- Applications will **not** be considered complete until **all** required information and documentation has been received.
- You **must** notify us of any changes in your address, telephone number, income, assets or household size within 31 days.
- You must update your application with The Registry at least once per year.
- You will only receive 3 offers of supportive housing. If you refuse these offers, you will be removed from the supportive housing waiting list.
- If you have any special requirements or limitations, please identify them in section 7 and provide supporting documentation.

Section 1: Main Applicant Information						
Last Name	First Name	Middle Name				
Gender	Date of Birth (mm/dd/yy)	Social Insurance Number (optional)				
What is your status in Canada? (copy of proof required)  Canadian Citizen Permanent Resident or applied for Permanent Resident Status  Landed Immigrant Refugee Claimant  Other:						
	Is at least one member of the household, over the age of 16, able to live independently with or without supports?					
If yes, who?						
Telephone and Email						
Home	Cell	Work				
Email						



Answering the following volumeservices for specific population		ificati	on questi	ons helps	desig	n program	s and
Ethnicity		Marit	al Status				
Do you identify as Indigenous to	Canada?	Yes	N	0			
If Yes, please select: First	st Nations	Inu	t M	létis	Prefe	er not to ar	ıswer
You may qualify for housing progra	ams specifically fo	r Indige	enous peop	oles.			
Are you, or someone in your hole Canadian Armed Forces or RCM		er men	nber of the	e Ye	s	No	
You may qualify for housing progra	ms specifically fo	r vetera	ans.				
Alternate Contact Information							
Last Name	First Name			Relationsh	ip		
Telephone No.	Email						
To make sure that you don't lose speak to this person about the can't reach you directly?	• •		•		we	Yes	No
Communication Preferences							
Services and communications a be available in certain circumsta		oth En	glish and	French. Int	erpreta	ation servic	es may
Choose one preferred	English		Spoken L	anguage(s	):	Eng	
language for correspondence:	French		'	3 3 (		Frer Neit	
Do you need an interpreter?	Yes No	)					
Interpreter Name	Telephone No	-		Langua	age		
Your interpreter will be contacted	d to help with yo	ur con	nmunicatio	on needs.			



Section 2: Co-Applicant Information					
What is your relationship to the N	/lain Applicant?				
Last Name	First Name		Middle Name		
Gender	Date of Birth (m		Social Insurance Number (optional)		
		ent or applied for	Permanent Resident Status		
Telephone and Email					
Home	Cell		Work		
Email					
Answering the following volun services for specific population		·	ns helps design programs and		
Ethnicity		Marital Status			
Do you identify as Indigenous to Ca	nada? Yes	No			
If Yes, please select: First Na	ations Inuit	Métis	Prefer not to answer		
You may qualify for housing specific	cally for Indigenous	peoples.			



### **Section 3: Other Household Members**

List all other people that will live with you.

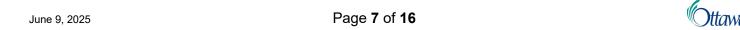
You must include proof of status in Canada for each member of this household.

Last Name	First Name	Gender	Date of Birth dd/mm/yy	Relationship to Main	Indigenous Status
				Applicant	(if applicable)
					First Nations
					Inuit
					Métis
					First Nations
					Inuit Métis
					First Nations
					Inuit
					Métis
					First Nations
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					First Nations
					Inuit
					Métis
					First Nations
					Inuit
					Métis
Please include additio	nal household membe	ers on a separ	ate piece of pape	r.	
Do you share custody	of the children listed of	on this applica	tion (if applicable	)? Yes	No
If Yes, please provide	verification in the form	of a court ord	der or notarized a	greement.	
Is any member of you	r household pregnant?	Yes	No		
If Yes, when is the bab	ov due?		(a doctor's note	is required to con	firm pregnancy)
in 103, which is the bat			(a doctor s note		iii iii pi cyriaiicy)



June 9, 2025 Page **6** of **16** 

Section 4: Address Information					
Current Address					
Street No.	Street Name		Unit No.		
City	Province		Postal C	Code	
Current Living Situation: Rer	nt Own Living v	vith friends/fami	y • C	Other	
Present Landlord	Landlord Telephone No.		Monthly	Rent	
Is this a social housing provider?	Yes No				
Is this a subsidized unit?	Yes · No				
If Yes, what type of subsidy?	Rent-Geared-to-Incom	e • Housir	ng Benefit	Not sure	
Why are you applying for housing	? (you may select more th	nan one reason)			
Affordability Locatio	n Medical/He	ealth Reasons		Accessibility	
Safety Reasons Need a	smaller/Larger Unit	Other:			
Mailing Address (if differen	nt from current addre	ess)			
Street No.	Street Name		Unit No.		
City	Province		Postal C	Code	
Previous Address – If you	have lived at above	address for l	ess tha	n two years	
Street No.	Street Name		Unit No.		
City	Province		Postal C	Code	
Previous Landlord	Telephone No.	Move In Date	1	Move Out Date	



### **Section 5: Household Income Information**

List all monthly income sources (before deductions) for you and each person in your household 16 years of age and older.

Documentation to verify income **must be attached** to the application. Provide the most recent Notice of Assessment issued by the Canada Revenue Agency for all household members 16 years and older.

Name of Household Member	Source of Income (i.e.: employment, pension, OW, ODSP, OSAP, etc.)	Gross Monthly Income (income before deductions)	Full-time Student?
			Yes

You may be required to pursue income from one or more of the following sources: Ontario Works, Employment Insurance, support payments, or any pension or support payments required under a sponsorship agreement.

Failure to pursue a specific type of income within the required time frame will result in a decision of ineligibility at the time of a housing offer.

June 9, 2025 Page **8** of **16** 



### **Section 6: Household Asset Information**

### Are all members of the household in receipt of OW or ODSP?

- **Yes Do not** complete this section. Proceed to Section 7 of the application.
- **No** List all assets owned by you and each household member 16 years of age and older that are not in receipt of OW or ODSP.

If the total value of household assets is equal to or more than \$40,000 for a single person household or \$65,000 for a household with two or more people, you must attach proof.

#### **Asset Types**

#### **❖** Bank Accounts

• i.e. savings accounts, chequing accounts, Tax-Free Savings Accounts, overseas or foreign accounts.

#### **❖** Value of 2<sup>nd</sup> or more Personal Vehicles

• the market value of the vehicle(s) minus any amount owing. If you do not know the value, please provide the make, model, year and odometer reading along with any amount owing.

#### Investments

i.e. stocks and bonds, term deposits, Guaranteed Investment Certificates, mutual funds, overseas
or foreign investments, Tax-Free Savings Accounts.

#### ❖ Real Estate Equity

i.e. residential and non-residential properties in Canada and in other countries.

#### Life Insurance

policies with a cash surrender value of over \$100,000 for the household.

#### ❖ Business Assets

- assets of a member, worth over \$20,000 that are necessary for the business; and
- assets necessary for the operation of the business over \$20,000, i.e. business bank accounts, business property, business vehicle and taxi license.

#### ❖ Trust funds

• i.e. value of the beneficial interest in a trust of a member of the household.

Name of Household Member	Type of Asset	Value \$



June 9, 2025 Page **9** of **16** 

<b>Section 7: Housing Pr</b>	referer	nces				
The size of unit you qualify for depen	nds on the	size and s	special needs o	of your hous	ehold.	
As a single person, you qualify for a 1 b a bachelor apartment? a single room in a rooming house?	edroom ap Yes Yes	artment. V No No	Vould you also o	consider:		
There is a shortage of larger units, and Are you willing to have your children sh	_		ay be given prio Yes	rity for them. No		
If you are 60 years of age or older, would yo	ou prefer se	nior housing	g communities?	Yes	No	
Do you own a vehicle that requires a parkin Parking is subject to availability and additional f	• .	Yes	No			
Accessible/Accommodation Hous	ing Requi	rement				
If you have any special requirements duand provide supporting documentation:  Special Requirements or Limitations:	ue to health	issues, or	limitations, plea	ase identify th	nem belo	)W
If these change, you must inform us.						
Certain housing providers have social h with physical disabilities. These units ha lowered counters, and widened doorwa	ave varying					
Do you, or someone in your household,	require an	accessible	e/modified unit?	Yes	No	
If <b>Yes</b> , I am attaching a "Questionnaire accompleted by a licensed physician. The one up at The Registry office, or have o	form is ava	ailable at <u>w</u>	ww.housingregi	stry.ca. You		pick
Do you, or someone in your household,	, have an in	tellectual/o	developmental o	disability?	Yes	No
If <b>Yes</b> , who?						
You may qualify for housing programs spec	cifically for p	eople with a	n intellectual/dev	elopmental di	sability.	_



## **Section 8: Community Selections**

The Registry will determine what size(s) of unit you qualify for based on the number of people in your household. Complete this section to choose where you would prefer to live, and if eligible, you will be placed on the waiting list of the communities you have selected.

Additional information about supportive housing providers and their communities can be found at www.housingregistry.ca and at <a href="https://registry.softr.app">https://registry.softr.app</a>.

If you have any special requirements or limitations, please identify them in section 7 and provide supporting documentation.

Some housing providers will have specific internal policies such as tenant insurance requirements and pet policies. These will be explained by the housing provider at the time of offer.

Offers are usually made by email and/or telephone during standard business hours.

#### You are only entitled to 3 offers of supportive housing.

If all offers are refused, for reasons that are not identified as special requirements or limitations above and/or the reasons are not considered valid by The Registry, you will be **removed** from the supportive housing waiting list. You will have to re-apply, with a new application date, to receive more offers.

If you accept an offer of housing, you will no longer be on the supportive housing waiting list. If you are on the waiting list for Rent-geared-to-income (RGI) housing, you will not lose your place if you accept a supportive housing unit.

Here are the terms used on the Community Selections area of the form.						
	Building Type Unit Size(s)					
APT	Apartments	Bach	Bachelor			
TH	Townhouses	BR	Bedroom(s)			
STH	Stacked Townhouses					
RH	Rooming House					



# **Supportive Housing Providers**

Select your preferred	l location(s) by	checking the box	beside the provider na	me.
Colour your profortor		oncoming the box	boolao allo providor ila	

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Review your selections carefully.

<b>✓</b>	Supportive Housing Providers	Building Type	Unit Size(s)
	Bruce House	APT	Bach, 1, 2 BR
	(Individuals and families living with HIV/AIDS)		
	Canadian Mental Health Association (CMHA)	RH	Room
	(Individuals and families living with mental illness)	APT	Bach, 1, 2 BR
	This is only available to active clients of the agency		
	Cornerstone	RH	Room
	(Single adult women who are homeless or at risk of homelessness)		Bach
	Daybreak Housing		Room
	(Single adult men and women at risk of homelessness; drug and/or alcohol use is not permitted. Shared common spaces)		
John	Howard Society		
	Windrose  (Single young women aged 16 – 20, who are at-risk of, or have past/current involvement in the justice system and are homeless or are unsuitably housed)	APT	1 BR
	A Different Street  (Single young men aged 16 – 21, who are at-risk of, or have past/current involvement in the justice system and are homeless or are unsuitably housed)	APT	Bach



	1	I
Montfort Renaissance	APT	Bach, 1 BR
(Individuals living with persistent mental illness or concurrent disorders, who are homeless or at risk of homelessness)		
Options Housing	APT	Bach, 1, 2 BR
(Single adult men and women at risk of homelessness)		
Ottawa Salus	RH	Room
(Only available to single adults living with severe and persistent mental health challenges and have active MHCSS and ACTT Case Managers at the time of move-in)	APT	Bach, 1, 2 BR
Personal Choice Independent Living (PCIL)	APT	Bach, 2 BR
(Single adult men and women with a permanent physical disability requiring personal care/supports for daily living)		
Shepherds of Good Hope	RH	Room,
(Single adult men and women)	APT	Bach, 1, 2 BR
Tewegan Transitional House	RH	Room
(Single young First Nation, Inuit and Métis women aged 16-29 who are homeless or at risk of homelessness)		
Veterans' House Canada - The Andy Carswell Building	APT	Bach
(Canadian Armed Forces and RCMP veterans, men and women, who are homeless or at risk of homelessness. Support services are administered by Ottawa Salus)		
Youth Services Bureau	APT	Bach, 1, 2 BR
(Single youth aged 16-21 who are homeless, at risk of homelessness or are unsuitably)		
•		



### **Section 9: Consent**

All people listed on this form who are 16 years of age and older must sign this form.

### **Consent to Collect, Use and Disclose Personal Information**

By signing and submitting this application, you agree to share information with The Registry to confirm your initial and ongoing eligibility for rent-geared-to-income.

- 1. I consent to the sharing of my personal information set out in this application form and any attachments by The Registry to:
  - the City of Ottawa, Employment and Social Service Centres;
  - other municipal service managers or district social services administration boards, housing providers; or
  - the Housing Services Corporation for former tenant arrears without further notice to me.
- 2. I understand that by signing this consent the information will only be shared if it is necessary for the purpose of making decisions or verifying eligibility for assistance under the *Housing Services Act*, 2011.
- 3. I allow The Registry to give the information on this form and any attachments to the government of Canada, a department, ministry, or agency of it, without further notice to me if the information is necessary for the purpose of administering or enforcing the *Income Tax Act* (Canada) or the *Immigration Act*.
- 4. I allow The Registry to give the information on this form and any attachments to the City of Ottawa, as Service Manager, without further notice to me, for the purpose of conducting research related to a social benefit program or social housing or RGI assistance program.
- 5. I understand that any information on this form and any attachment given by The Registry to a body listed above is confidential and will only be given in accordance with the *Housing Services Act, 2011* and associated regulations, as well as the Municipal Freedom of Information and Protection of Privacy Act, since The Registry is an agent of the City of Ottawa for the purpose of administering the waiting list for rent-geared-to-income.
  - "Personal information contained in this form or in attachments is collected by The Registry pursuant to the *Freedom of Information and Protection of Privacy Act* (R.S.O. 1990 c. F.31) or the *Municipal Freedom of Information and Protection of Privacy Act* (R.S.O. 1990 c.M.56) and under the legal authority of the *Housing Services Act, 2011*, for the purpose of administering Government of Ontario social assistance programs and/or City of Ottawa social programs. This information may be used to determine eligibility for housing applied to, continuation of housing and may be used for the appropriate rent-geared-to-income charge."

The Privacy Officer for The Registry is the Executive Director. Questions or concerns about the use of your personal information may be directed in writing to our office at 240 Catherine St, Suite 110, Ottawa, ON, K2P 2G8.

June 9, 2025 Page **14** of **16** 

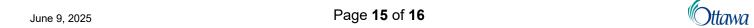


### **Section 10 - Declaration**

- 1. I give my word that everything I have written in this application is correct and complete.
- 2. I understand that all information I give to The Registry, as agent for the City of Ottawa as Service Manager, will be retained by them and they will give my information to the housing providers I have chosen.
- 3. If something on this application is incorrect or not true, The Registry or the housing providers I have applied to may request additional information, may cancel my application or both.
- 4. I understand that only the people I have listed on this application form may live with me in rent-geared-to-income housing.
- 5. I understand that The Registry will use the information I give them to see if I qualify for the housing I have applied for, to see if I continue to qualify for rent-geared-to-income assistance, and to see how much assistance I am eligible for.
- 6. I give my word that I am in Canada legally.
- 7. Before I can receive housing, I understand that I must pay back or make arrangements to pay any money I owe to any social housing provider.
- 8. I understand that I must report any changes to this information directly to The Registry.
- 9. I must update my application with The Registry at least once per year. **Failure to do so** may result in the cancellation of your file.

Please sign here to indicate your agreement with the *Consent* and *Declaration* above (include signatures of all household members 16 years of age and older).

1	Signature	Date	2	Signature	Date
3	Signature	Date	4	Signature	Date
5	Signature	Date	6	Signature	Date
7	Signature	Date	8	Signature	Date



# **Application Checklist - Is your application complete?** Use this checklist to make sure that you have completed the form and have attached all the required documents. $oxedsymbol{arDelta}$ Completed all sections of the application. Provided photocopies of proof of status in Canada for all members of the household. Provided confirmation of pregnancy from a medical professional (if applicable). Provided a photocopy of the most recent Notice of Assessment (NOA) issued by the Canada Revenue Agency for all household members 16 years of age and older. Provided most recent statement of OW or ODSP (if applicable). Provided photocopies of asset information if the total value of household assets is equal to or more than \$40,000 for a single person household or \$65,000 for a household with two or more people. All household members 16 years of age and older have read, understood, and signed Section 10 – Consent and Section 11 – Declaration. Provided documents regarding the custody of children listed on this form, i.e. court order or notarized written agreement that details the custody arrangements (if applicable). Provide verification of full time studies for any member of your household (aged 16 and over) who is a full time student (if applicable).

Incomplete applications will not be processed until all required information and documentation has been received.

